### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070115\_Miller.pdf

Form T-1 July 2014

Form must be Typed Form must be Signed All blanks must be Filled

## REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form. Check Applicable Boxes: Oil Lease: No. of Oil Wells \_\_\_\_1 July 1, 2015 Effective Date of Transfer: Gas Lease: No. of Gas Wells \_ KS Dept of Revenue Lease No.: \_\_\_\_\_ Gas Gathering System: Lease Name: Miller Saltwater Disposal Well - Permit No.: \_ NE \_ SW \_ NW \_ NW \_ Sec. \_5 \_ Twp. \_32 \_ R. \_1 \_\_ V E W Spot Location: \_958 \_ feet from ✓ N / S Line Legal Description of Lease: NW/4 Sec. 5, 32S-1E 419 \_ feet from 🔲 E / 🗸 W Line Enhanced Recovery Project Permit No.: \_ County: Sumner Entire Project: Yes No Number of Injection Wells \_ Production Zone(s): Simpson Field Name: Wildcat Injection Zone(s):\_ \*\* Side Two Must Be Completed. Surface Pit Permit No.: 15-191-22769 958 feet from V N / S Line of Section (API No. if Drill Pit, WO or Haul) 419 E / ✓ W Line of Section feet from Type of Pit: Emergency Burn Settling Haul-Off Workover ✓ Drilling 34633/ Bill Kent Past Operator's License No. Contact Person: \_ Phone: 720-763-3670 Source Energy MidCon LLC Past Operator's Name & Address: 1805 Shea Center Drive, Suite 100, Highlands Ranch, CO 80129 October 20, 2015 Title: VP Engineering Received Signature: KANSAS COI 2 2 2015 35032 New Operator's License No. Alex T. Warmath Contact Person: **CONSERVATION DIVISION** New Operator's Name & Address: K3 Oil LLC Phone: 832-234-0810 WICHITA, KS 211 Highland Cross, Suite 250, Houston, TX 77073 Oil / Gas Purchaser: Coffeyville Date: October 20, 2015 Title: CEO Signature:  $\sqrt{}$ Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_ 15-191-22769 has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. \_ is acknowledged as \_\_\_ is acknowledged as the new operator and may continue to inject fluids as authorized by the new operator of the above named lease containing the surface pit permitted by No.: 15-191-22769 . Recommended action: Date: Authorized Signature Authorized Sign

DISTRICT

Mail to: Past Operator

PRODUCTION //.

District

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.:	$\mathcal{M}$			
* Lease Name:	Miller * Location: Sumner County, KS				
Well No.	API No. (YR DRLD/PRE '67)			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
5-11-24	15-191-22769	Gircle 958 FNL FSL/FNL	Circle 419 FWL FEL/FWL	Oil	Active
·		FSL/FNL	FEL/FWL		
-		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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-		FSL/FNL	FEL/FWL	KAN	ISAS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL		OCT 2 2 2015  CONSERVATION DIVISION
		FSL/FNL			WICHITA, KS
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-			FEL/FWL		
		FSL/FNL	FEL/FWL		

A separate sheet may be attached if necessary

<sup>\*</sup> When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers more than one section please indicate which section each well is located.

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Form KSONA-1 July 2014 Form Must Be Typed Form must be Signed All blanks must be Filled

# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB	-1 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 34633	_ Well Location:		
Name: Source Energy MidCon LLC	NE_SW_NW_NW_Sec. 5 Twp. 32_S. R. 1 X East West		
Address 1: 1805 Shea Center Dr. STE 100			
Address 2:	Lease Name: Miller		
City: Highlands Ranch State: CO Zip: 80129 +	Well #:		
Contact Person: Bill Kent	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: ( 720 ) 763-3670 Fax: ( 720 ) 387-8621	-		
Phone: ( 720 ) 763-3670 Fax: ( 720 ) 387-8621  Email Address: bkent@sourceep.com	~ A		
Email Address: Receive  KANSAS CORPORATION	COMMISSION		
Name: Robert H. Miller and Roxann Rooney  Address 1: 48 80th Terrace CONSERVATION WICHITA  Address 2: City: Treasure Island State: FL Zip: 33706 +	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.		
the NCC with a plat showing the predicted locations of lease roads, ta	hodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat I on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
CP-1 that I am filing in connection with this form; 2) if the forr form; and 3) my operator name, address, phone number, fax  I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and		
	of fee with this form. If the fee is not received with this form, the VCONA 4		
hereby certify that the statements made herein are true and assured	he the best of a land and a land		
hereby certify that the statements made herein are true and correct October 20, 2015	to the best of my knowledge and belief.		
	VP Engineering		